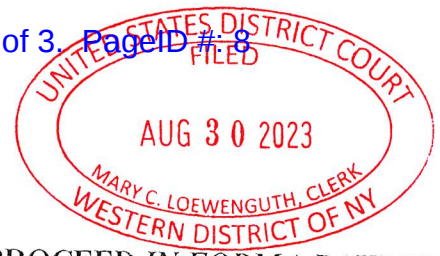


UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF NEW YORK



David LeHien

(Name of Plaintiff or Petitioner)

v.

MOTION TO PROCEED *IN FORMA PAUPERIS*
AND SUPPORTING AFFIRMATION

-CV-

23 CV 906-V

Olivette Products LLC

(Name of Defendant(s) or Respondent(s))

I, David LeHien, (print or type your name) am the plaintiff/petitioner in the above-entitled case and hereby request the Court's permission to proceed *in forma pauperis*.

In support of my motion to proceed without being required to prepay fees, costs, or give security therefor, I state that because of my poverty I am unable to pay the costs of this action or to give security therefor and that I believe I am entitled to redress.

I further declare that the responses which I have made in this affirmation below are true.

1. Are you presently employed? Yes ☐ No ☒

My Employer's Name and Address is: _____

My Gross Monthly Wages are: \$ _____

If you are not presently employed, state

Your Last Date of Employment: _____

Your Gross Monthly Wages at that time: _____

Is your spouse presently employed? Yes ☐ No ☐

My Spouse's Employer's Name and Address is: _____

My Spouse's Gross Monthly Wages are \$ _____

2. Have you received any money from any of the following sources within the past twelve months:

a. Business, profession or self-employment? Yes ☐ No ☒

If yes, state source and amount received per month \$ _____

b. Rent payments, interest or dividends? Yes ☐ No ☒

If yes, state source and amount received per month \$ _____

c. Pensions, annuities, disability, or life insurance payments? Yes ☐ No ☒

If yes, state source and amount received per month \$ _____

d. Gifts or inheritances? Yes ☐ No ☒

If yes, state source and amount received per month \$ _____

e. Child Support? Yes ☐ No ☒

If yes, state amount received each month \$ _____

f. Government Benefits (Social Security, SSI, Welfare, AFDC, Veterans, etc.)? Yes ☐ No ☒

If yes, state source and amount received per month \$ _____

g. Friends, Relatives or any other source? Yes ☐ No ☒

If yes, state source and amount received per month \$ _____

If you have not received any money from any of the above sources, please explain how you are currently paying your expenses:

No expenses

3. What is your total gross monthly income today: \$ 0

4. How much cash do you have on hand? \$ I don't know

5. How much money do you have in a checking account(s)? \$ I don't know
6. How much money do you have in a savings account(s)? \$ I don't know
7. If you are an inmate of a correctional facility, state the amount of funds in your inmate account (NOTE: prisoners must have inmate account balances certified by an authorized official of the correctional facility and must include a signed Authorization for payment of the filing fee): I don't know
8. Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? Yes ☒ No ☐
If so, describe the property in detail and give an estimated value of the property: I don't know
- If you own property, are you paying off a loan or mortgage on it? Yes ☐ No ☐
If yes where are you obtaining the money to make such payments: _____
9. If you are not an inmate, state your total monthly household expenses:
Rent or mortgage \$ _____ Food \$ _____ Utilities \$ _____ All other expenses \$ _____
If your monthly expenses exceed the amount of income you listed in # 3 above, please explain how you are paying your expenses

10. List all of the people who are in your household and state the amount of money each one contributes to household expenses each month: None
11. List the persons who are dependent upon you for support, state your relationship to those persons, and indicate how much you contribute toward their support: None
12. Have you been adjudicated bankrupt within the past ten (10) years? Yes ☐ No ☒
If the answer is yes, please include the court and date of filing: _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 8/8/23
(Date)

(Applicant's Signature)

PRISON CERTIFICATION SECTION

(Required for Prisoner Requests Only; Prisoner Requests Must Have This Section Completed By Prison Official)

- I certify that the movant has the sum of \$ 0.07 on account to his/her credit at the Northeast
DH11 Correctional Facility where s/he is currently confined.
- I further certify that the movant has the following securities to his/her credit according to the institution's records: 0
- I further certify that the movant's average account balance was \$ 16.04 during the last six months.

D. HETH
Signature of Authorized Officer of Institution

Dean GRAVATTE
Print Name of Authorized Officer of Institution

Revised 05/01 WDNY

AUTHORIZATION

PRISONER'S CIVIL ACTION FILING FEE WESTERN DISTRICT OF NEW YORK

I, (print name) David C. Lehen, request and authorize the agency holding me in custody, to send to the Clerk of the United States District Court, Western District of New York, a certified copy of the statement for the past six months of my trust fund account (or institutional equivalent) at the institution where I am incarcerated.

I further request and authorize the agency holding me in custody to calculate and disburse funds from my trust account (or institutional equivalent) in the amounts specified by 28 U.S.C. § 1915 (b), to deduct those amounts from my prison trust account (or institutional equivalent), and to disburse those amounts from my account to the United States District Court for the Western District of New York.

This Authorization shall apply to any other agency into whose custody I may be transferred, and to any other district court to which my case may be transferred and by which my poor person application may be decided.

This Authorization is furnished in connection with the commencement of a federal court civil action, and I understand that I must pay the total amount of the filing fee, which is \$350.00.

I understand that by signing this authorization, the entire filing fee of \$350.00 will be paid to the court in installments by automatic deductions from my prison trust fund account even if my case is dismissed before the entire amount of the fee has been deducted from my account.

Dated: August 20, 2023

David C. Lehen
Signature of prisoner

David C. Lehen
Printed name of prisoner

1609 1509
Inmate number of prisoner

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